# REDUCING THE OCCURRENCE OF LATE BABYNET ELIGIBILITY DETERMINATIONS USING METRICS BASED PROCESS IMPROVEMENT

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### Introduction

BabyNet (BN) is South Carolina's Federal Part C program of the Individuals with Disabilities Education Act (IDEA). Part C of IDEA, administered through the Office of Special Education Programs (OSEP), is a federal grant program that assists states in operating a comprehensive statewide program of early intervention services for infants and toddlers with disabilities, birth through two years of age, and their families. The Part C regulations require all referrals be processed and an Individualized Family Service Plan (IFSP) be completed within 45 days of a child's referral date. In South Carolina, the responsibility of the first 45-days is shared between the South Carolina Department of Health and Human Services' (SCDHHS) BN Eligibility Program and the South Carolina Department of Disabilities and Special Needs (SCDDSN) Early Intervention program. BN Eligibility conducts the eligibility determinations, then transfers the case to DDSN for plan completion. BN has 25-days from referral date to determine eligibility and transfer the case to DDSN.

BN processes approximately 17,000 - 20,000 referrals per year. The expectation of OSEP is that the 45-day timeline be met for all referrals, without exception. When the BN program exceeds the 25-day requirement, the consequences are: findings of non-compliance; and, more importantly, children are delayed in receiving the critical services that they need.

BN has, historically, received significant numbers of findings of non-compliance for the 45-day process. In 2017, the Governor moved the BN program to the SCDHHS. SCDHHS restructured the BN program into two work functions, Policy and Eligibility. This allowed the Eligibility leadership to function only on one function- meeting the eligibility timelines. I was hired at SCDHHS as the BN Eligibility Program Manager in 2018. Coming from DDSN I knew

there was historical non-compliance in the BN Eligibility program. If the program was going to be successful, it would require a cultural assessment of the BN Eligibility team. The first thing was a site visit to each office statewide and a meeting with all area team members. The purpose of these meetings was to gain an understanding of the team members experiences and their issues with the BN system as it operated at that time. Based on these meetings, it became apparent all BN team members believed in the importance and value of the program and wanted it to be successful. However, it did not appear as though all of the team members were committed to what it would take make the program successful, it was a "vacuous culture" (Chatman and Eunyoung, 2003). Strengthening the culture of the program would be critical for the BN Eligibility program to be successful and compliant with the OSEP.

BN Eligibility has twelve (12) local offices that are responsible for the 46 counties in South Carolina (See Appendix 1). Each of the twelve offices have a BN Intake Supervisor. It appeared each office had their own way of procedural operations causing a lack of consistency statewide. Some of the offices had developed their own tracking systems, quality assurance processes, forms, etc. These twelve offices are divided into seven (7) districts. When findings of non-compliance are given, they are at the district level (See Appendix 2).

In an effort to decrease the number of eligibility decisions that exceed the 25-day requirement, the plan is to strengthen the culture of the BN team and to conduct an analysis of the current work process cycle time gaps in current and past timelines; potential reasons for constrictions in the processes, and analysis of areas historically meeting the timeframes.

### **Data Collection**

To determine the current work process cycle time gaps a workgroup was assembled to gather data, review current and proposed changes in the eligibility processes. The workgroup was comprised of four BN supervisors, two State Office staff and a data analyst. The following two questions were asked of the workgroup:

- 1. Where are there gaps in timely eligibility decisions?
- 2. Why are there gaps in timely eligibility decisions?

The following answers were given to the abovementioned questions:

- Prolonged vacancies Several BN offices had prolonged, more than six months,
   vacancies in 2019 and 2020 (See Appendix 3). Without adequate numbers of staff,
   referrals cannot be processed in a timely manner.
- Referral numbers are increasing—Based on the data (See Appendix 4) the referral
  numbers are increasing. Potential reasons for the increased referral numbers are
  anecdotal, there's no current data to support the reasons; however, some possible answers
  to the increased referrals are:
  - The development of a Central Referral Team (CRT), centralizing the call in and scheduling process for the entire state. All referrals are now captured and counted at the state-level, prior processes could have left uncounted referrals at the local level and potentially led to unprocessed referrals
  - Increased responsiveness to referral sources. With the new process, all Referral
     Status Updates are sent at referral and after Eligibility evaluation.

- Data system insufficiencies
  - The current BN electronic data system falls short in its ability to: produce quality reports, track timeframes for individual steps in the process, and assist users with individual timeline tracking.
- Delays in transfer of cases to DDSN
  - o BN secures the families top three choices for Early Intervention Providers. Once determined eligible, the BabyNet Intake Coordinator (BNIC) contacts the first provider of choice to inquire if they can accept the case. The provider has one business day to respond. If the provider is unable to take the case, the BNIC moves to the family's second choice following the same steps. This process can cost BN Eligibility several days of the 25-day timeline.
- Lack of standardized monitorship/quality assurance processes
  - Standardized quality assurance tools and expectations must be set to coincide with metrics-based process.
- Lack of clear expectations.
- Lack of consequences for poor performance and no incentives for exceptional performance.

## **Analysis of Workgroup Data**

The prolonged vacancies caused some of the BN areas to be significantly out of compliance, scheduling four months out. The majority of the findings from 2019 and 2020 are due to these prolonged vacancies. Eight of the sixteen vacancies have been filled. There are other steps in the eligibility process, that can cause delays and findings of non-compliance.

As previously stated, the current BN electronic system does not produce the necessary data to capture many of the procedural lapses in the mandated timelines. The system does not allow for tracking of individual case timelines and does not generate an automated report to the BNIC detailing steps of completion or steps yet to be completed.

As previously stated, once BN determines eligibility the case is transferred to SCDDSN for plan completion. The BNIC is required to transfer the case to DDSN within three days of the eligibility decision. The BNIC secures the families top three choices, the BNIC could potentially be waiting three days from those three providers to determine if the provider will accept the case.

BN Eligibility has two major functions, evaluation and intake, there were no standardized monitorship processes or tools for either function. Two separate quality assurance tools would need to be developed. Based on timeline data and workgroup discussions, expectations were not clear and there were no consequences for missed steps in the requirements. The BN process would need to be analyzed and broken into critical steps/elements, in order to build a metrics-based performance process.

### **Implementation Plan**

A metrics-based performance process must be based on elements within the control of the individual employee. For example, an office that has five vacancies will not meet the 25-day timeline. This should not be a reflection of the work performed by the individual employees. The employees who are working should have a process to evaluate their work based on their individual performance. For example, did the BNIC take the necessary steps to meet the timeframes mentioned above? What steps in the process are within the BNIC's control? The employee's performance metrics would need to be built around the timeframes they can control.

A BN Eligibility Employee Performance Metrics (BNEPM) draft was created and shared with positions within the BN team. Feedback meetings were scheduled and conducted to discuss the proposed metrics. All comments were acknowledged and incorporated, if possible. A SharePoint site for data collection was created and shared with the management team; changes to format and content were made based on feedback from the team. Once finalized and implemented feedback systems will be put into place. At a minimum: monthly, quarterly, and yearly feedback meetings will occur to review and discuss performance. If, based on performance, an employee falls into a substandard category, additional training and employee feedback meetings will be added to the requirements. For employees that meet their metrics, the proposed plan would allow for them to receive additional compensation (e.g., bonuses or pay increases at time of EPMS review).

Performance in the two major functions of eligibility, Evaluation and Intake is a major step of the metrics process. To this end, two separate workgroups were developed to create, pilot, and give feedback on a QA tool prior to statewide implementation. Beginning in February 2021, the BN Evaluation Quality Assurance Tool (EQAT) will be completed for each staff member on a monthly basis. The tool is based on 100% scale. The monthly scores will be entered into a SharePoint site and will be tracked over time, to determine an acceptable metrics score (e.g., 95%, 90%). The other function of eligibility is the Intake Record, this is federally required paperwork which documents the completion of all required steps. A QA tool was developed to capture the accuracy of the BN Intake Record. The workgroup created the BN Intake Quality Assurance Tool (IQAT) and has begun collecting data in a similar process as was referenced for the EQAT.

To create a process to track individual case timelines, with the assistance of SCDHHS Data Governance, a daily report was created to capture the dates for each step in the eligibility process. The following data is critical to timeframes and metrics: referral date, date of intake visit, eligibility date, and the transfer to ongoing service coordinator date. The eligibility date must be within one (1) business day of the intake visit and the transfer to ongoing service coordinator must be no more than three (3) business days from the eligibility date. These steps are measurable and controllable by the individual BNIC.

BN's 25-day time clock ends at the time of transfer to DDSN. To decrease the number of days the BNIC is waiting to transfer the case, a new process was discussed with the management team. The new process being suggested has the BNIC sending a blind copy email simultaneously to the family's top three provider choices. The BNIC would give the three providers one business day to respond. This may significantly reduce the number of cases that exceed the 25-day timeline. This process change includes another agency, so interagency dialogue is needed to increase the likelihood of by in by all involved.

### **Evaluation Method**

BN Management will begin entering scores into the Performance Metrics SharePoint site in February 2021. Meetings are scheduled to occur on an ongoing basis to discuss scores, issues with QA tools, feedback process, documentation, etc. The reports created by data governance are now shared on a daily basis with the management team. All critical timelines are tracked and reported on this daily report. Supervisors are monitoring the daily report and reporting results on upcoming or missed timelines. The missed timelines, that are driven by the BNIC, will be reflected on the performance metrics, and discussed in the feedback meetings.

# **Summary and Recommendations**

In summary, it is anticipated that by setting clear expectations up front and allowing a local level of monitorship will result in employees feeling empowered to take ownership of their performance results. This leads to increased performance and a reduction in late eligibility determinations. In addition, once enough historical data is collected, the BN team will be able to determine baseline performance and develop a systemic analysis and tie-in to the Agency's EPMS system allowing individual employees to be compensated in relation to their work effort.

# References

Jennifer A. Chatman and Sandra Eunyoung Cha. <u>Leading by Leveraging Culture</u>, *California Management Review* University of California Berkley, Vol. 45, No. 4 (Summer 2003).



# **Late BabyNet Eligibility Determination Data**

2019 Findings of Non-Compliance - # of late eligibility determinations/plans by district -

Anderson -6 Richland -10

Beaufort -0 Spartanburg -15

Charleston - 11 York - 0

Myrtle Beach -12

2020 Finding of Non-Compliance - # of late eligibility determinations/plans by district -

Anderson -2 Richland – 10

Beaufort - 0 Spartanburg - 4

Charleston -37 York - 0

Myrtle Beach – 8

BabyNet Referral Numbers by District and Year				
BN District	2019	2020	2021	
			(June 2020-Dec 31, 2020)	
Anderson	1444	1304	771 X 2 for the year 1542	
Charleston	1871	2012	1231 X 2 for the year 2462	
Colleton	653	601	350 X 2 for the year 750	
Horry	2932	2744	1937 X 2 for the year 3874	
Richland	2483	2545	1818 X 2 for the year 3636	
Spartanburg	3394	3849	2039 X 2 for the year 4078	
York	836	884	544 X 2 for the year 1088	

Vacancies by BabyNet Area				
BabyNet AREA	DISTRICT	# of VACANCIES		
Anderson	Anderson	2		
Colleton	Colleton	2		
Sumter	Horry	1		
York	York	1		
Myrtle Beach	Horry	1		
Charleston	Charleston	5		
Greenville	Spartanburg	4		
	Total	16		